

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT
 UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

FILED

U.S. DISTRICT COURT
EASTERN DISTRICT ARKANSAS

IN THE UNITED STATES DISTRICT COURT
 FOR THE EASTERN DISTRICT OF ARKANSAS

DEC 02 2020

DIVISION

JAMES W. MCCORMACK, CLERK

CASE NO. 4:20-cv-01418-BSM-JTR

By: AB

DIP CLERK

Jury Trial: ☒ Yes ☐ No
 (Check One)

I. Parties

In item A below, place your full name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.

A. Name of plaintiff: Michael Robertson
 ADC # 30 #106563

Address: 3201 W ROOSEVELT RD Little Rock AR

Name of plaintiff: _____
 ADC # _____

Address: _____

This case assigned to District Judge Miller
 and to Magistrate Judge Ray

Name of plaintiff: _____
 ADC # _____

Address: _____

In item B below, place the full name of the defendant in the first blank, his official position in the second blank, his place of employment in the third blank, and his address in the fourth blank.

B. Name of defendant: B-Powell

Position: Deputy

Place of employment: Pulaski County Jail

Address: 3201 W. ROOSEVELT RD Little Rock AR

Name of defendant: _____

Position: _____

Place of employment: _____

Address: _____

Name of defendant: _____

Position: _____

Place of employment: _____

Address: _____

Name of defendant: _____

Position: _____

Place of employment: _____

Address: _____

II. Are you suing the defendants in:

- ☐ official capacity only
☐ personal capacity only
☒ both official and personal capacity

III. Previous lawsuits

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action?

~~N/A~~ Yes ~~No~~ I am checking NO this Difference Case

B. If your answer to A is yes, describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

☒ Parties to the previous lawsuit: _____

Plaintiffs: Michael Otis Robertson

Defendants: Lt Nicole Nelson, Sgt Murphy
 Deputy Gregory Belt

☐ Court (if federal court, name the district; if state court, name the county): _____

☐ Docket Number: _____

☐ Name of judge to whom case was assigned: _____

☐ Disposition: (for example: Was the case dismissed? Was it appealed? Is it still pending?) _____

☐ Approximate date of filing lawsuit: _____

☐ Approximate date of disposition: _____

IV. Place of present confinement: _____

V. At the time of the alleged incident(s), were you:
(check appropriate blank)

_____ in jail and still awaiting trial on pending criminal charges

_____ serving a sentence as a result of a judgment of conviction

☒ in jail for other reasons (e.g., alleged probation violation, etc.)

explain: FAILED TO PAY FINES

VI. The Prison Litigation Reform Act (PLRA), 42 U.S.C. § 1997e, requires complete exhaustion of administrative remedies of all claims asserted, prior to the filing of a lawsuit. There is a prisoner grievance procedure in the Arkansas Department of Correction, and in several county jails. Failure to complete the exhaustion process provided as to each of the claims asserted in this complaint may result in the dismissal without prejudice of all the claims raised in this complaint.

A. Did you file a grievance or grievances presenting the facts set forth in this complaint?

Yes ☒ No _____

B. Did you completely exhaust the grievance(s) by appealing to all levels within the grievance procedure?

Yes ☒ No ☐

If not, why?

VII. Statement of claim

State here (as briefly as possible) the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I Michael Robertson promise this is the truth what I'm about to say. Oct-30-2020 B-Powell came to my door open my trap for Breakfast at 4:30 5:00 am I ask him for a tray an ask to see the nurse for my pain. I put my arm out the Trap he sad you got the right one today I sad what he strated twisting my Left arm he thouth that I was put something in the trap, but I was not he still was twisting my hand an my arm it is all on Bodycam

Case 4:20-cv-01418-BSM-JTB Document 2 Filed 12/02/20 Page 3 of 8
people started coming to the doors

Mr. Daetnaum M. Jones BI#1375-18 was in cell 306, Mr Lewis was in 307 cell. that is when Deputy B Powell pull out his ~~flash~~ flashlight in was going to hit

me with it, But Mr Lewis an 307 cell said ~~I~~ nnu powell I know you not going to hit him with the flashlight Mr Powell thouth about in put it Back up an walk off from my cell Door he had his Bodylam on to an it is Camber on the out Door of 301 cell an the Day room that seen it all so he cannot lie. He came Back close my trap an I did not see him again.

I want to file a Claim for Physical force, Unnecessary force

pain and suffering and press charge That is the ~~the~~ first time this happen this year

Go to the Back side
of the Paper Please

Relapse Prevention Plan

~~_____~~

1. I Michael Robertson
2. is taking pill they
3. have been giving me
4. Cold Pack and Hot Pack
5. Body Can do not lie in Anido Don't lie

~~_____~~

1.

2.

3.

4.

5.

~~_____~~

1.

2.

3.

4.

5.

The Deputy
gave me this paper
to write on.

VIII. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

For Mental and Emotional Pain and Suffering, Physical Force that was Unnecessary, against I and I wish to \$100,000 For Pain And suffering Physical injuries and any other Reliefs that I am entitled to.

I declare under penalty of perjury (18 U.S.C. § 1621) that the foregoing is true and correct.

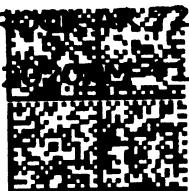
Executed on this 18 day of November 2020.

Michael Robertson
Signature(s) of plaintiff(s)

MICHAEL ROBERTSON SO # 106563
Pulaski County Detention Facility
3201 West ROOSEVELT ROAD
Little Rock, AR 72204

LITTLE ROCK, AR 72204

30 NOV 2020



US POSTAGE

\$00.80⁰⁰

First-Class

Mailed From 72204

11/30/2020

032A 0061816150

Pro Se Clerk
600 West Capital Avenue, Room 1A149
Little Rock, Arkansas 72201

FM

72201-332999

